

**U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT  
ENFORCEMENT AND REMOVAL OPERATIONS  
ICE HEALTH SERVICE CORPS**

**MEDICAL-PSYCHIATRIC ALERT**

**IHSC Directive: 03-12**

**ERO Directive Number: 11746.1**

**Federal Enterprise Architecture Number: 306-112-002b**

**Effective: 09 Feb 2015**

**Annual Review: 21 Mar 2016 No Changes**

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**By Order of the Acting Assistant Director**  
**Stewart D. Smith, DHSc/s/**

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1. **PURPOSE:** The purpose of this issuance is to set forth the policies and procedures for Medical/Psychiatric (Med/Psych) Alerts.
2. **APPLICABILITY:** This directive applies to all IHSC personnel, including but not limited to, Public Health Service (PHS) officers, civil service employees, and federal contractors. It is applicable to IHSC-staffed facilities supporting health care operations in ICE owned or contracted detention facilities, and to IHSC Headquarters staff. This directive applies to contract personnel when supporting IHSC in detention facilities and at HQ. Federal contractors are responsible for the management and discipline of their employees supporting IHSC.
3. **AUTHORITIES AND REFERENCES:**
  - 3-1. Title 8, Code of Federal Regulations, Section 235.3 (8 CFR 235.3), Inadmissible Aliens and Expedited Removal;
  - 3-2. Section 232 of the Immigration and Nationality Act (8 USC 1222), Detention of Aliens for Physical and Mental Examination;
  - 3-3. Title 8, Code of Federal Regulations, Section 232 (8 CFR 232), Detention of Aliens for Physical and Mental Examination;
  - 3-4. Section 322 of the Public Health Service Act (42 USC 249(a)), Medical Care and Treatment of Quarantined and Detained Persons; and
  - 3-5. Title 42, U.S. Code, Public Health Service Act, Section 252 (42 USC 252); Medical Examination of Aliens.

4. **POLICY:** IHSC creates a Med/Psych Alert in the Enforcement and Removal Operations (ERO) detention/removal records to provide ICE operational units with relevant medical information of detainees/residents prior to their removal, release or transfer. It is noted in the corresponding window in the electronic health record.

**4-1. Form IHSC-834.** The main purpose of the Med/Psych Alert Form (IHSC-834) is to notify the ICE Field Office Director (FOD) or designee that certain detainees/residents have medical/psychiatric conditions in the event the detainees/residents must be removed, released, or transferred. This form is also used when a detainee/resident requires a medical escort if removed or transferred. IHSC-834 will be printed on brightly colored paper.

5. **PROCEDURES:**

**5-1. Completion of the Med/Psych Alert Form.** A health care professional shall immediately complete the Med/Psych Alert Form (IHSC-834) in relation to:

- a. A medical escort.
- b. Directly observed treatment.
- c. Medical care requiring ongoing therapy such as (not specified on IHSC-834):
  - (1) All chronic conditions.
  - (2) Tuberculosis (TB) disease.
  - (3) Other currently communicable diseases.
  - (4) Ongoing physical therapy.
- d. Mental health care requiring ongoing therapy such as:
  - (1) All chronic mental illness.
  - (2) Suicide risk.
  - (3) Potential for violent behavior.
- e. Medical Housing Unit care.
- f. Notification of pregnant females.

- 5-2. **Disposition of the Med/Psych Alert Form.** The health care provider completing the IHSC-834 must give the form to the medical records technician who then provides the IHSC-834 to the ICE Assistant Field Office Director (AFOD) or designee. Medical records staff must flag the medical alert field in the detainee/resident's electronic health record.
6. **HISTORICAL NOTES:** This is an annual review with no changes.
7. **DEFINITIONS:** See definitions for this guidance at [IHSC Glossary](#).
8. **APPLICABLE STANDARDS:**
- 8-1. **Performance-Based National Detention Standards (PBNDS):**  
2011 ICE Performance-Based National Detention Standards  
(1) V. Expected Practices- (M) Medical/Psychiatric Alerts and Holds;
- 8-2. **ICE Family Residential Standards:** 4.3 Medical Care; V. Expected Practices; 22: Transfer and Release of Residents;
- 8-3. **American Correctional Association (ACA):**  
2012 ACA Standards Supplement  
(1) Performance-Based Standards for Correctional Health Care in Adult Correctional Institutions, 1st Edition  
1-HC-1A-28  
1-HC-3A-03
- 8-4. **National Commission on Correctional Health Care (NCCHC):**  
2014 NCCHC Standards for Health Services in Jails  
(1) J-A-08: Communication on Patients' Health Needs  
(2) J-B-02: Patient Safety  
(3) J-G-02: Patients with Special Health Needs  
(4) J-G-05: Suicide Prevention Program.
9. **RECORDKEEPING.** IHSC maintains detainee/resident health records as provided in the Alien Health Records System of Records Notice, 80 Fed. Reg. 239 (Jan. 5, 2015).

**Protection of Health Records and Sensitive Personally Identifiable Information (PII).**

- 9-1. Staff must keep all health records, whether electronic or paper, secure with access limited only to those with a need to know. Staff must lock paper records in a secure cabinet or room when not in use or not otherwise under the control of a person with a need to know;

- 9-2. Staff are trained at orientation and annually on the protection of a patient's health information and Sensitive PII;
  - 9-3. Only authorized individuals with a need to know are permitted to access health records and Sensitive PII; and
  - 9-4. Staff should reference the Department of Homeland Security *Handbook for Safeguarding Sensitive PII* (Handbook) at:  

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when additional information is needed concerning safeguard sensitive PII.
10. **NO PRIVATE RIGHT STATEMENT.** This directive in an internal polycystatement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.